	Effective October 1, 2003 10 -767 - 642										
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY OTHER THAN TYPE OR SMALL ENTITY				
TOTAL CLAIMS		26			•		RATE	FEE	7	RATE	FEE
FOR		NUMBER FILED		NUMB	ER EXTRA	1	BASIC F	E 385.00	OR	Basic Fee	770.00
TOTAL CHARGEABLE CLAIMS		26 minus 20=		• 6		1	XS 9=	1	OR	V210	108
INDEPENDENT CLAIMS		6 minus 3 =		3		1	X43=	 	OR	- Vaa	259
MULTIPLE DEPENDEN	RESENT					1105-	 	1		<u> </u>	
* If the difference in column 1 is less than zero, enter "0" i				**************************************	olumn 2		+145=		JOR	+290=	1127
CLAIMS AS AMENDED - PART II							TOTAL		JOR	TOTAL.	1136
(Column 1) (Column 2) (Column 3)							SMALI	ENTITY	OR	SMALL	
5	CLAIMS EMAINING AFTER IENDMENT		HIGHE NUMB PREVIO PAID F	IER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- JIONAL FEE
Total •	9	Minus		2	•]	X\$ 9=	17	OR	X\$18-	1
independent •	2	Minus	-6		•]	X43=	/	OR.	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1		+290≈	
TOTAL OR TOTAL											
. (C	ADDIT, FEE		JUN	ADOIT, PEE							
	CLAIMS EMAINING AFTER ENDMENT		(Colum HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total •	.9	Minus	-21	6	• O ₁] [X\$ 9=		OR	X\$18=	
Independent •	2	Minus	***		<u>· U</u>	!	X43= .	٠	OR	X86=	:/
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+145=		OR	+290=	7
						L	TOTAL		OR	TOTAL	
ADOIT. FEE ADOIT. FEE ADOIT. FEE (Column 1) (Column 2) (Column 3)										•	
RE	LAIMS MAINING NFTER ENDMENT	•	HIGHE NUMBE PREVIOU PAID FO	ST ER ISLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		PATE	ADDI- TIONAL FEE
Total •		Minus	.				X\$ 9=		OR	X\$18=	
Independent *	1	Minus	***				X43-			X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR		
If the citry in column 1 is less than the entry in column 2, write "I in column 3." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20." OR +290= TOTAL OR +290= OR +290=										•	
" If the Triched Abunbar P	reviews Dat	For the Third	COACE		M **** ***	•	DOIT, FEE	· •	OR .	DDIT. FEEL	

Application or Docket Number